

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION

IN RE: Jack County Hospital District

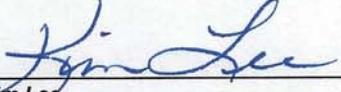
CASE NO 20-

CHAPTER 9

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 06/11/2020

Signature   
*Kim Lee*  
*Chief Operating Officer*

Date \_\_\_\_\_

Signature \_\_\_\_\_

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